

WELFARE TO WORK EXEMPTION REQUEST

PLEASE PRINT		COUNTY USE ONLY	
YOUR NAME:			
ADDRESS: STREET		COUNTY	
CITY	ZIP	CASE NAME	
PHONE NUMBER ()		CASE NO.	OTHER ID NO.
QUESTIONS? ASK YOUR WORKER.		WORKER NAME	

If you have been told that you may be required to be in Welfare to Work or you are already in Welfare to Work, you may request to be exempt from Welfare to Work because of one of the reasons listed below. If you are eligible for the Cal-Learn Program, or if you got a high school degree or its equivalent while you were in the Cal-Learn Program, some of these exemptions may not apply to you. For more information, contact your eligibility worker or Cal-Learn case manager. Please also send any information that will help the county decide if you should be exempt from Welfare to Work.

If you answer "Yes" to any of these questions, you may be exempt from Welfare to Work. Please answer all of the questions. This form cannot be completed by the county. Please be sure to sign and date the bottom of this form.

YES NO

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|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Are you under 16 years old? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Are you 16, 17 or 18 years old and in high school or adult school? (Does not apply if you are in high school or adult school as a Welfare to Work assignment.) |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Are you the nonparent relative caretaker of a child who is a dependent or ward of the court, or a child at risk of being placed in foster care? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Are you staying home to take care of someone in the household who can't take care of him/herself on basis that keeps you from regularly working or participating in a Welfare to Work activity? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Are you the parent or caretaker of a child six months old or under (or, depending on the County, for a child 12 weeks old or under or for a child 12 month old or under)? Ask your worker how old your child has to be for you to be exempt. This exemption is available only once. (Does not apply if you are a teen parent who is required to participate in the Cal-Learn Program.) |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Are you physically or mentally unable to work or to participate in a Welfare to Work activity on a regular basis for at least 30 calendar days? Please describe and provide any medical proof you have. _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Are you 60 years old or older? |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Are you pregnant and a doctor states that you cannot work or participate in Welfare to Work activities? |

- You will be informed whether or not you are exempt from Welfare to Work and the reason why.
- You may be asked to give the county proof of your reason.
- If you do not agree with the county, you may ask for a State Hearing.

YOUR SIGNATURE	DATE
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